

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000085135

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** IMAGINE - HILLSBOROUGH COUNTY, LLC

**Current Principal Place of Business:**

3250 MARY STREET, SUITE 202  
COCONUT GROVE, FL 33133

**New Principal Place of Business:**

13790 N.W. 4TH STREET  
SUITE 108  
SUNRISE, FL 33325

**Current Mailing Address:**

3250 MARY STREET, SUITE 202  
COCONUT GROVE, FL 33133

**New Mailing Address:**

13790 N.W. 4TH STREET  
SUITE 108  
SUNRISE, FL 33325

**FEI Number:** 20-4513877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: IMAGINE SCHOOLS NON-PROFIT, INC.  
Address: 1005 NORTH GLEBE ROAD, SUITE 610  
City-St-Zip: ARLINGTON, VA 22201

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DENNIS BAKKE

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04/28/2011

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Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date